

Shen Ming

Health Cultivation Center

Notice of Privacy Practices Effective September 2014

This notice describes how medical information about you may be used and disclosed and how you can access this information.

Please review it carefully. The privacy of your personal and health information is important. This requires no action on your part unless you have a request or complaint.

Protecting all Patients' Personal and Health Information (PHI)

Shen Ming Health Cultivation Center understands the importance of keeping your personal and health information private. Personal health information includes both medical information and individually identifiable information, such as your name, address, telephone number, or social security number. We are required by applicable federal and state laws to maintain the privacy of your personal and health information.

Both by law and our policy, Shen Ming Health Cultivation Center has a responsibility to protect the privacy of your **PERSONAL AND HEALTH INFORMATION (PHI)**. We

- Protect your privacy by limiting who may see your PHI;
- Limit how we may use or disclose your PHI;
- Inform you of our legal duties with respect to your PHI;
- Explain our privacy policies; and
- Strictly adhere to the policies currently in effect.

This is a notice of Shen Ming Health Cultivation Center's privacy practices, our legal duties, and your rights concerning your personal and health information. This notice takes effect 09/15/2014 and will remain in effect until we replace it and provide you notice of such changes.

We reserve the right to change our privacy practices and the terms of this notice at any time, as allowed by applicable law, rules and regulations. We reserve the right to make changes in our practices and in the terms of our notice for all personal and health information that we maintain, including information we created or received before we make the changes. When we make a significant change in our privacy practices, we will change this notice and send the notice to all our patients. For more information about our privacy practices, or for additional copies of this notice, please contact us at the number listed at the end of this notice.

How we may Use and Disclose Personal and Health Information About You:

At Shen Ming Health Cultivation Center we may use and disclose your personal and health information, without your consent/authorization, in the following ways:

Treatment: We may disclose your personal and health information to another doctor or a hospital in case you require emergency and prompt medical services.

Payment: We may use and disclose your health information to insurance companies to obtain payment for services we provide to you.

Health & Wellness Information: We may use your personal and health information to contact you with information about health-related benefits and services, appointment reminders, or about treatment alternatives that may be of interest to you. If the information is provided to you by a general newsletter or is for products or services, you may opt-out of receiving further information by notifying us using the contact information listed at the end of this notice.

Medical Emergency or Disaster Relief: If you are unavailable to communicate in such circumstances we may disclose your personal and health information to a family member, friend or other person to the extent necessary to help with your health care.

Death: We may disclose the personal and health information of a deceased person to a coroner, medical examiner or funeral director.

Public Health and Safety: We may disclose your personal and health information to the extent necessary to avert a serious and imminent threat to your health or safety or the health or safety of others. We may disclose your personal and health information to appropriate authorities if we have reasonable belief that you are a possible victim of abuse, neglect, domestic violence or other crimes.

Process and Proceedings: We may disclose your personal and health information in response to a court or administrative order, subpoena, discovery request, or other lawful process.

Law Enforcement: We may disclose limited information to law enforcement officials concerning the personal and health information of a suspect, fugitive, material witness, crime victim or missing person.

Your Authorized Use and Disclosure of Your Personal and Health Information

Shen Ming Health Cultivation Center will request written authorization from you to use your personal and health information or to disclose it to anyone for any purpose or situation not included in this document.

If you give us an authorization, you may revoke it in writing at any time. Your revocation will not affect any use or disclosures permitted by your authorization while it was in effect. We will not use or disclose your personal and health information for any reason except those described in this notice without your written authorization.

Your Individual Rights Pertaining to Your Personal and Health Information

Access: You have the right to review or obtain copies of your personal and health information with certain exceptions. You may request that we provide copies in a format other than photocopies. You may submit this request in writing by obtaining a form from Shen Ming Health Cultivation Center using the contact information listed at the end of this notice. If you request copies, we may charge you a fee for each page, and per hour for staff time to locate and copy your personal and health information, and postage.

Disclosure Accounting: You have the right to receive a list of instances in which we disclose your personal and health information for purposes other than treatment. Effective 09/15/14, Shen Ming Health Cultivation Center will begin maintaining these types of disclosures for up to six (6) years. If you request this list more than once in a 12-month period, we may charge you a reasonable, cost-based fee for responding to these additional requests. You may submit this request in writing using the contact information listed at the end of this notice.

Restriction Requests: You have the right to request that we place additional restrictions on our use or disclosure of your personal and health information. We are not required to agree to these additional restrictions, but if we do, we will abide by our agreement (except in a need for your emergency treatment). You also have the right to agree to or terminate a previously submitted restriction. You may submit this request in writing using the contact information listed at the end of this notice.

Alternate Communication: You have the right to request that we communicate with you about your health information by alternative means or to alternative locations. You must make your request in writing. Your request must specify the alternative means or location, and provide satisfactory explanation how payments will be handled under the alternative means or location you request.

Amendment: You have the right to request that we amend your personal and health information. Your request must be in writing, and it must explain why the information should be amended. We may deny your request if we did not create the information you want amended, we do not maintain the information, or the information is accurate and complete.

3Electronic Notice: You have the right to receive this notice in written form upon request. Please contact us using the information listed at the end of this notice to obtain this notice in written form.

If You Have a Question or Complaint

If you want more information about our privacy practices or have questions or concerns, please contact us. If you are concerned that we may have violated your privacy rights or you disagree with a decision we made about access to your personal and health information or in response to a request you made to amend or restrict the use or disclosure of your health information or to have us communicate with you by alternative means or at alternative locations, you may complain to us using the contact information listed at the end of this Notice. You may also submit a written complaint to the U.S. Department of Health and Human Services. We will provide you with the address to file your complaint upon request.

We support your right to the privacy of your personal and health information. We will not retaliate in any way if you choose to file a complaint with us or with the U.S. Department of Health and Human Services.

Contact: Patricia Sievers DAOM, LAc.
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Telephone: 310-545-5588